

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>AB</i>	<i>72192</i>	<i>2/4/00</i>
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	<i>15/12</i>	<i>60745</i>	<i>1/10/00</i>
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	00/01/00
2	01/02/00
3	02/03/00
4	03/04/00
5	04/05/00
6	05/06/00
7	06/07/00
8	07/08/00
9	08/09/00
10	09/10/00
11	10/11/00
12	11/12/00
13	12/01/01
14	01/02/01
15	02/03/01
16	03/04/01
17	04/05/01
18	05/06/01
19	06/07/01
20	07/08/01
21	08/09/01
22	09/10/01
23	10/11/01
24	11/12/01
25	12/01/02
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28	03/04/02
29	04/05/02
30	05/06/02
31	06/07/02
32	07/08/02
33	08/09/02
34	09/10/02
35	10/11/02
36	11/12/02
37	12/01/03
38	01/02/03
39	02/03/03
40	03/04/03
41	04/05/03
42	05/06/03
43	06/07/03
44	07/08/03
45	08/09/03
46	09/10/03
47	10/11/03
48	11/12/03
49	12/01/04
50	01/02/04

Claim	Date
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Claim	Date
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BEST AVAILABLE

If more than 150 claims or 10 actions  
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